## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)			PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Opportunity PAC			C C00550368
			M = M / D = D / Y = Y = Y
	New report A	mends report file	
Full Name of Payee Caiman Strategies			Date of Public Distribution/Dissemination
Mailing Address P. O. Box 45			03 / 11 / 2016
Walling Address P. U. BOX 45			Amount
City State	e Zip Code		7410.96
Miami FL	33245		Transaction ID : SE.4205 Date of Disbursement or Obligation
Purpose of Expenditure voter contact-telephone calls	Category. Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate	X	Support Office	ce Sought: House District:
Marco Rubio			President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	0.0		oursement For: X Primary General  Other (specify)
Full Name of Payee			Date of Public Distribution/Dissemination
Data Targeting Research, LLC			03 / 11 / 2016
Mailing Address 6211 BW 132nd Street			Amount
City Stat	e Zip Code		25000.00
Gainesville FL	32653		Transaction ID : SE.4202  Date of Disbursement or Obligation
Purpose of Expenditure voter contact-telephone calls	Category. Type		M M / D D / Y Y Y Y
Name of Federal Candidate	$\times$	Support Office	ce Sought: House District:
Marco Rubio		Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	0.0	004	oursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		·····	32410.96
(b) SUBTOTAL of Unitemized Independent Expenditures		·····	
(c) TOTAL Independent Expenditures		······	
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized committee		·
Nancy Watkins Signature	[Electronically Filed]	Date	03
dignature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	IDENT EXTEND	ITOTIES		PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
American Opportunity PAC				C C00550368	
Check if 24-hour report 48-hour report	ort New rep	ort Amends repo		M / D D / Y Y Y Y Y	
Full Name of Payee Frontline Strategies, Inc.				of Public Distribution/Dissemination	
Mailing Address P. O. Box 1491				03 10 2016	
			Amour	nt	
City	State	Zip Code		21800.00	
Tallahassee	FL	32302		action ID : SE.4207  of Disbursement or Obligation	
Purpose of Expenditure direct voter contact		Category/ Type	М	M / D D / Y Y Y Y	
Name of Federal Candidate		Support	Office Sought	t: House District:	
Marco Rubio		Oppose	X Preside	ent Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement 2016 Ot	t For:	
Full Name of Payee Groundswell Strategies, LLC			M	of Public Distribution/Dissemination	
Mailing Address 5246 SW 8th Street			Amou	03 11 2016	
Suite 205-D			Amou		
City	State	Zip Code		56250.00	
Miami	FL	33134		ction ID : SE.4216 of Disbursement or Obligation	
Purpose of Expenditure direct voter contact		Category/ Type	М	M / D D / Y Y Y Y	
Name of Federal Candidate		Support	Office Sough	t: House District:	
Marco Rubio		Oppose	X Preside	ent Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	,	0.00	Disbursement 2016 Of	t For:	
(a) SUBTOTAL of Itemized Independent Exp	andituras			78050.00	
(a) CODICIAL OF HOMIZOG INGOPORIGINE EXP	onditures			76030.00	
(b) SUBTOTAL of Unitemized Independent E	Expenditures		• •	4 4	
(c) TOTAL Independent Expenditures			•	110460.96	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Nancy Watkins	[Electron	ically Filed] Date	03	11 2016	
Signature					